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FRIEDRICH KUEFFNER 317 MADISON AVENUE, SUITE 910 NEW YORK, NY 10017

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Friedrich Kueffner	(Depositor's name)
41 Myss	(Signature)
Oct. 5, 2006	(Date)

29,482

Registration No.

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR			ATTORNEY DOCKET NO.	CONFIRMATION NO.		
10/531,683	04/15/2005	Klaus Russke			BU-06PCT	1195		
TITLE OF INVENTION: C	ONVERTIBLE							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1400		\$300	\$1700	10/05/2006		
EXAM	INER	ART UNIT		CLASS-SUBCLASS	7			
MORROW	MORROW, JASON S 30			296-108000	_			
1. Change of correspondence CFR 1.363).	e address or indication of "F	ee Address" (37	, •	nting on the patent front page,	list Friedr	ich Kueffner		
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(1) the na	mes of up to 3 registered/pate OR, alternatively,	EGBOOTHEVENAME TESTEROTE	ich Kueffner 18531683		
			(2) the na	me of a single firm (having as	a member a 2	1400.00 UP		
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer			(2) the name of a single firm (halking as a smember a registered attorney or agent) and the frames of up to 2 registered patent attorneys or agents. If no name is 300.00 OP					
Number is required.			listed, no	name will be printed.				
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	THE PATEN	Γ (print or type)				
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified by 37 CFR 3.11. Completion	clow, no assignee of this form is NO	data will app Fa substitute	ear on the patent. If an assig for filing an assignment.	mee is identified below, the	document has been filed for		
(A) NAME OF ASSIGN			(B) RESIDENCE: (CITY and STATE OR COUNTRY)					
Wilhelm Karmann GmbH			49084 Osnabrűck, Germany					
						_		
Please check the appropriate	assignee category or catego	ries (will not be pr	inted on the p	atent): Undividual 🗵 (Corporation or other private gr	oup entity Government		
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	mall entity discount permitte		Payment by credit card. Form PTO-2038 is attached.					
Advance Order - # of	Copies		☑ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 11-1835 (enclose an extra copy of this form).					
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Authorized Signature	& Under			Date	Oct. 5, 2006			

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Friedrich Kueffner